



## UNITED STATES PATENT AND TRADEMARK OFFICE

Isis Ref: BIOL 0019US

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 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
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APPLICATION NUMBER	FILING OR 371 (e) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/667,236	09/17/2003	Susan Gregory	23546-08149

35807  
 FENWICK & WEST LLP  
 801 CALIFORNIA STREET  
 MOUNTAIN VIEW, CA 94014

**RECEIVED**

JUN 21 2004

FENWICK &amp; WEST LLP

CONFIRMATION NO. 6787

FORMALITIES LETTER



\*OC000000012961641\*

Date Mailed: 06/16/2004



## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is \$130 for a Large Entity

- \$130 Late oath or declaration Surcharge.

Replies should be mailed to: Mail Stop Missing Parts  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria VA 22313-1450

*A copy of this notice **MUST** be returned with the reply.*

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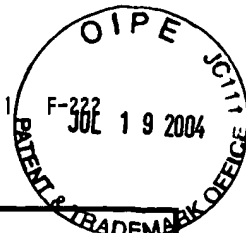
07/20/2004

130.00 DA

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Y.G.  
Customer Service Center  
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



# FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 130.00**Complete if Known**

Application Number 10/667,236  
 Filing Date September 17, 2003  
 First Named Inventor Susan Gregory  
 Examiner Name Unassigned  
 Art Unit 1632

Attorney Docket No. 23546-08149 (Isis Ref: B100019US)

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None  
☒ Deposit Account:

Deposit Account Number 19-2555

Deposit Account Name Fenwick &amp; West LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>			<b>(\$)</b> 0.00

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
	20**	X	
Independent Claims	3**	X	
Multiple Dependent			

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1202 18	2202 9	Claims in excess of 20	
1201 85	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	**Reissue independent claims over original patent	
1205 18	2205 9	**Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>			<b>(\$)</b> 0.00

\*\*or number previously paid, if greater. For Reissues, see above

**FEE CALCULATION** (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	130.00
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 260	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(g)	
1808 180	1808 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify):

**SUBTOTAL (3)** (\$)

130.00

\*Reduced by Basic Filing Fee Paid

**SUBMITTED BY****Complete (if applicable)**

Name (Print/Type) Susan T. Hubel Registration No. (Attorney/Agent) 47,668 Telephone 415.875.2316

Signature

Susan T. Hubel

Date

July 19, 2004

PATENT



## IN THE UNITED STATES

## PATENT AND TRADEMARK OFFICE

APPLICANT(S): Susan Gregory  
APPLICATION NO.: 10/667,236  
FILING DATE: September 17, 2003  
TITLE: MOUSE MODEL FOR BONE METABOLISM  
EXAMINER: Unassigned  
GROUP ART UNIT: 1632  
ATTY. DKT. NO.: 23546-08149 (Isis Ref. No. BIOL0019US)

CERTIFICATE OF FACSIMILE TRANSMISSION			
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.			
Signature:	<i>Susan T. Hubl</i>		
Typed or Printed Name:	Susan T. Hubl, Ph.D. Patent Agent	Dated:	July 19, 2004
Facsimile Number:	1-703-746-4060		

MAIL STOP MISSING PARTS  
COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450

RESPONSE TO NOTICE TO FILE MISSING  
PARTS OF APPLICATION

SIR:

Responsive to the Notice to File Missing Parts dated June 16, 2004 received in the above-identified patent application,

☒ Enclosed are:

- ☒ a copy of the Notice to File Missing Parts;
- ☒ an original, signed Declaration;
- ☒ an signed Power of Attorney;
- ☒ an signed Statement Under 37 CFR § 3.73(b);

23546/08149/SF/5124964.11

**PATENT**

☒ payment in the amount of \$ 130.00 for the

☒ missing parts surcharge.

☐ Other

Respectfully submitted,  
Susan Gregory

Dated: July 19, 2004

By: *Susan T. Hubl*  
Susan T. Hubl, Ph.D. Patent Agent  
Reg. No.: 47,668  
Fenwick & West LLP  
Silicon Valley Center  
801 California Street  
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Tel.: (415) 875-2316  
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**FENWICK & WEST LLP**

SAN FRANCISCO OFFICE | 275 BATTERY ST., SUITE 1500 | SAN FRANCISCO, CA 94111

TEL 415.875.2300 | FAX 415.281.1350 | WWW.FENWICK.COM

**FACSIMILE TRANSMISSION****CONFIDENTIAL****DATE:** July 19, 2004**CLIENT-MATTER No.:** 23546-08149

ISIS Ref. No. BIOL0019US

**To:**

NAME	FAX No.	PHONE No.
Commissioner for Patents	(703) 746-4060	

**FROM:** Susan T. Hubl**PHONE:** (415) 875-2316

NUMBER OF PAGES WITH COVER PAGE: 11

ORIGINAL WILL NOT FOLLOW

**MESSAGE:****RESPONSE TO NOTICE OF MISSING PARTS**

Applicants: Susan Gregory  
App. No.: 10/667,236  
Filing Date: September 17, 2003  
Title: Mouse Model for Bone Metabolism  
Atty. Dkt. No. 23546-08149

**CAUTION - CONFIDENTIAL**

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IF YOU DO NOT RECEIVE ALL OF THE PAGES, OR IF THEY ARE NOT CLEAR,  
PLEASE CALL Tracie Brooks AT (415) 875-2482 AS SOON AS POSSIBLE.



<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence during pendency of filed application)</i>		Application Number	10/667,236
		Filing Date	September 17, 2003
		First Named Inventor	Susan Gregory
		Group Art Unit Number	1632
		Examiner Name	Not Yet Known
Total Number of Pages in This Submission	11	Attorney Docket Number	23546-08149 (ISIS ref. BIQL0019US)

ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Letter to Chief Draftsperson
<input checked="" type="checkbox"/> Response to Notice to File Missing Parts (2 pages)	<input type="checkbox"/> Formal Drawing(s): [ ] Sheet(s) of Figure(s) [ ]
<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Declaration	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> Power of Attorney or Authorized Agent	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References	<input checked="" type="checkbox"/> Fax Cover Page
<input type="checkbox"/> Request for Corrected Filing Receipt	<input checked="" type="checkbox"/> Statement under CFR § 3.73(b)
<input type="checkbox"/> Request for Correction of Recorded Assignment	<input checked="" type="checkbox"/> Declaration (37 CFR 1.63) for Utility or Design Application Using an Application Data Sheet
<input type="checkbox"/> Amendment/Response: [ ] Page(s)	<input checked="" type="checkbox"/> COPY Notice to File Missing Parts (2 pp)
<input type="checkbox"/> After Final	<input type="checkbox"/>
<input type="checkbox"/> Status Request	<input type="checkbox"/>
<input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/>
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT			
Signature:			
Attorney/Reg. No.:	Susan T. Hubl, Ph.D., Patent Agent Reg. No. 47,668	Dated:	July 19, 2004

CERTIFICATE OF FACSIMILE TRANSMISSION			
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.			
Signature:			
Typed or Printed Name:	Susan T. Hubl	Dated:	July 19, 2004
Facsimile Number:	1-703-746-4060		

23546/08149/SF/5113741.1